

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         |          | 6      | 9-12-01 |
| O.I.P.E. CLASSIFIER       |          |        |         |
| FORMALITY REVIEW          |          |        |         |
| RESPONSE FORMALITY REVIEW |          |        |         |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim |          | Date |  |
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| Final | Original |      |  |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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